

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

405632

FILING DATE

11/27/89

APPLICANT(S)

NANKAI, J.

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		2				
7		2				
8		1				
9		2				
10		2				
11		(1)				
12		1				
13		1				
14		1				
15	1					
16	1					
17		2				
18		2				
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50						
TOTAL IND.	3					
TOTAL DEP.	21					
TOTAL CLAIMS	24					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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